



___ Miss ___ Mr. ___ Mrs. ___ Ms.

Name (First/Middle/Last): _____

Birthday: ___/___/___ Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ - _____

Work Phone: (_____) _____ - _____

Mobile Phone: (_____) _____ - _____

Emergency Contact Name: _____ Relationship: _____

Emergency Contact Mobile #: (_____) _____ - _____ Home #: (_____) _____ - _____

Current Employer: _____ Title: _____

Does your employer provide matching funds or grants for volunteer hours? _____

T-Shirt Size (We provide T-Shirts for certain special events.) Please circle size (unisex): S M L XL 2XL 3XL

Why are you interested in volunteering with Classroom Central? _____

How did you hear about us? ___ Web Search ___ From a Friend ___ From my Company/Organization, ___ Other (please list) _____

Please check all that apply & circle computer skill. U=unskilled, S-somewhat skilled, H-highly skilled

Computer Skills

- Excel: U S H
- Word: U S H
- Adobe Creative Suite: U S H
- I am comfortable inputting data

Special Events

- I can assist with promotional events
- I can assist with volunteer fair events
- I can volunteer on nights/weekends
- I have photography/videography skills

Social Media

- I can manage a Facebook account
- I can manage a Twitter account
- I can manage an Instagram account

Warehouse Skills

- I can lift 50 pounds
- I can stand for long periods of time
- I can use a pallet jack

If you belong to a civic group(s), please list name and location: _____

If you are a member of a religious group, please list where you attend: _____

Are you interested in learning more about conducting a Classroom Central School Supply Drive? _____

If you are interested in helping us pick up donations, please indicate vehicle type: _____

If you have a Harris Teeter VIC card and would like for Classroom Central to benefit from your purchases, please list your 11 digit card number: _____

ASSUMPTION OF RISK, RELEASE OF LIABILITY, AND HOLD HARMLESS AGREEMENT

THIS IS A LEGAL DOCUMENT. READ IT CAREFULLY BEFORE SIGNING.

Classroom Central, Inc. owes much of its success to our hard-working volunteers. Without their time and efforts, many classrooms and students in the greater Charlotte area would lack the basic tools for learning. In this way our volunteers are an invaluable resource. We also realize, however, that due to the inherent nature of volunteer work, there are some risks which will always exist.

In consideration for permitting me and/or my child to participate as a volunteer at Classroom Central, Inc., and for other valuable consideration, I acknowledge and agree, for myself and/or for my child and for my executors, heirs, and assigns that there are certain risks of physical injury as a result of my or my child's participation in volunteer activities at Classroom Central, Inc., and I agree to personally assume the full risk of any injuries, damages, or loss which I or my child may sustain as a result of participating in any or all activities connected to or associated with Classroom Central, Inc. I understand that these risks, although very remote, may include but are not limited to, neck and back injuries which may result in complete or partial paralysis, injuries to my muscular or skeletal system, lacerations and cuts to my hand(s), finger(s), toe(s), arm(s), or leg(s), which may result in serious and permanent injury, and injury to other aspects of my general health and well-being.

I HEREBY WAIVE, RELEASE, AND FOREVER DISCHARGE CLASSROOM CENTRAL, INC., ITS OFFICERS, DIRECTORS, BOARD MEMBERS, EMPLOYEES, SUCCESSORS, AGENTS OR ASSIGNS FROM ALL CLAIMS, DEMANDS, SUITS, CAUSES OF ACTION, LIABILITIES, LOSSES, DAMAGES, JUDGMENTS OR COSTS OF ANY NATURE, WHICH MAY ARISE IN CONNECTION WITH, RELATE TO, OR RESULT BY REASON OF MY TRAVEL TO OR FROM OR PARTICIPATION IN THE VOLUNTEER ACTIVITIES (INCLUDING RESCUE ACTIVITIES ASSOCIATED WITH THE VOLUNTEER ACTIVITIES), WHETHER CAUSED BY THE NEGLIGENCE OF CLASSROOM CENTRAL, INC., ITS OFFICERS, DIRECTORS, BOARD MEMBERS, EMPLOYEES, SUCCESSORS, AGENTS OR ASSIGNS, OR CAUSED BY SOME OTHER MEANS. FURTHER, I HEREBY AGREE NOT TO FILE SUIT AGAINST CLASSROOM CENTRAL, INC., ITS OFFICERS, DIRECTORS, BOARD MEMBERS, EMPLOYEES, SUCCESSORS, AGENTS OR ASSIGNS FOR CLAIMS ARISING FROM, RELATED TO, OR BY REASON OF THE TRAVEL TO OR FROM OR PARTICIPATION IN THE VOLUNTEER ACTIVITIES.

I AGREE TO INDEMNIFY AND HOLD CLASSROOM CENTRAL, INC., ITS OFFICERS, DIRECTORS, BOARD MEMBERS, EMPLOYEES, SUCCESSORS, AGENTS OR ASSIGNS HARMLESS FROM ALL CLAIMS, DEMANDS, SUITS, CAUSES OF ACTION, LIABILITIES, LOSSES, DAMAGES, JUDGMENTS OR COSTS OF ANY NATURE WHICH MAY ARISE IN CONNECTION WITH, RELATE TO, OR RESULT BY REASON OF MY TRAVEL TO OR FROM OR PARTICIPATION IN THE VOLUNTEER ACTIVITIES (INCLUDING RESCUE ACTIVITIES ASSOCIATED WITH THE VOLUNTEER ACTIVITIES), WHETHER CAUSED BY THE NEGLIGENCE OF CLASSROOM CENTRAL, INC., ITS OFFICERS, DIRECTORS, BOARD MEMBERS, EMPLOYEES, SUCCESSORS, AGENTS OR ASSIGNS, OR CAUSED BY SOME OTHER MEANS.

Photographic Release: I do hereby grant and convey unto Classroom Central, Inc. all right, title, and interest in any and all photographic images and video or audio recordings made by Classroom Central, Inc. during the Volunteer Activities with Classroom Central, Inc., including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

I have carefully read this document, fully understand its contents, and sign it voluntarily. I state that I am at least 18 years old and am competent to sign this document. This document shall bind me, my heirs, agents, assigns, executors, administrators and personal representatives.

Signature (Guardian Signature, if under 18)

Name (printed)

Date: _____

Waiver approved by the Board of Directors September 13, 2016